

Identification Label

Student ID:

Student Name:

Student *Questionnaire*

Main Survey 2001

A large, light gray stylized letter 'P' serves as a background for the PIRLS logo. The word 'PIRLS' is written in a bold, dark gray serif font across the middle of the 'P'.

PIRLS

IEA
Progress in
International Reading
Literacy Study

<PIRLS National Research
Center Name>
<Address>

Directions

In this booklet, you will find questions about you and what you think. For each question, you should choose the answer you think is best.

Let us take a few minutes to practice the kinds of questions you will answer in this booklet.

Example 1 is one kind of question you will find in this booklet.

Example 1 _____

Do you go to school?

*Fill **one** circle only.*

Yes -- ☐

No -- ☐

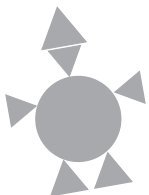
Example 2 is another kind of question you will find in this booklet.

Example 2 _____

How often do you do these things?

*Fill **one** circle for each line.*

	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
a) I listen to music	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I talk with my friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I play sports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Example 3 is another kind of question you will find in this booklet.

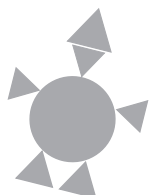
Example 3

What do you think? Tell how much you agree with these statements.

*Fill **one** circle for each line.*

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) Watching movies is fun	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I like eating ice cream	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Read each question carefully, and pick the answer you think is best. Fill in the circle next to or below your answer. If you decide to change your answer, erase your first answer and then fill in the circle next to or under your new answer. Ask for help if you do not understand something or are not sure how to answer.





1

Are you a girl or a boy?

Girl -- ☐

Boy -- ☐

2

When were you born?

Fill the circle next to the month and year you were born.

a) Month

b) Year

January -- ☐

1988 -- ☐

February -- ☐

1989 -- ☐

March -- ☐

1990 -- ☐

April -- ☐

1991 -- ☐

May -- ☐

1992 -- ☐

June -- ☐

1993 -- ☐

July -- ☐

1994 -- ☐

August -- ☐

1995 -- ☐

September -- ☐

Other -- ☐

October -- ☐

November -- ☐

December -- ☐



Things you do outside of school

3

How often do you do these things outside of school?

Fill **one** circle for each line.

	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
a) I read aloud to someone at home ---	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I listen to someone at home read aloud to me -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I talk with my friends about what I am reading-----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I talk with my family about what I am reading-----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I read for fun outside of school -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I read to find out about things I want to learn -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) I watch television or videos outside of school-----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4

How often do you read these things outside of school?

Fill **one** circle for each line.

	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
a) I read comic books	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I read stories or novels	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I read books that explain things (You might read about your favorite athlete, about animals you like, or a place you visited.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I read magazines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I read newspapers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I read directions or instructions (You might read them to put a toy together, to learn how to play a game, or to do something else.) ----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) <I read subtitles on the television screen>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) <country-specific>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



5

How often do you borrow books from your school or local library to read for fun?

*Fill **one** circle only.*

At least once a week -- ☐

Once or twice a month -- ☐

Never or almost never -- ☐

6

About how much time do you spend watching television or videos outside of school on a normal school day?

*Fill **one** circle only.*

No time -- ☐

Up to 1 hour -- ☐

From 1 hour up to 3 hours -- ☐

From 3 hours up to 5 hours -- ☐

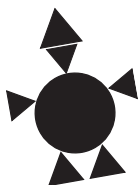
5 hours or more -- ☐

7

In school, how often do these things happen?

Fill **one** circle for each line.

In school ...	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
a) my teacher reads aloud to the class	↓	↓	↓	↓
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I read aloud to the whole class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I read aloud to a small group of students in my class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I read silently on my own	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I read along silently while other students read aloud	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I read books that I choose myself ---	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



8

After you have read something in class, how often do you do these things?

Fill **one** circle for each line.

	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
After I have read something in class ...				
a) I answer questions in a workbook or on a worksheet about what I have read	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I write something about what I have read (<i>for example, a summary, a story, or how I felt about what I read</i>)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I answer questions aloud that my teacher asks about what I have read	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I talk with other students about what I have read	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I draw pictures or do an art project about what I have read	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I act in a play or drama about what I have read	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) I do a group project with other students in the class about what I have read	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) I take a written quiz or test about what I have read	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9

How often does your teacher give you reading to do for homework (for any subject)?

*Fill **one** circle only.*

I never have reading to do
for homework -- ☐

Less than once a week -- ☐

1 or 2 times a week -- ☐

3 or 4 times a week -- ☐

Every day -- ☐

10

On days when you have reading to do for homework (for any subject), how much time do you spend on this reading?

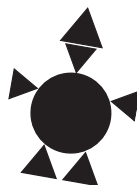
*Fill **one** circle only.*

I never have reading to do
for homework -- ☐

Half hour or less -- ☐

Between a half hour and 1 hour -- ☐

1 hour or more -- ☐

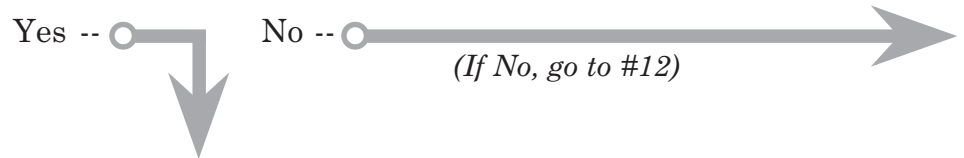


Things you do on a computer

11

Do you ever use a computer?

(Do not include Nintendo®, GameBoy®, or other TV/video game computers.)



If Yes...

11a. How often do you use a computer in each of these places?

*Fill **one** circle for each line.*

	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
a) I use a computer at home -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I use a computer at school -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I use a computer at some other place -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11b. How often do you do these things with a computer?

*Fill **one** circle for each line.*

	Every day or almost every day	Once or twice a week	Once or twice a month	Never or almost never
a) I play computer games -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I use the computer to write reports or stories -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I use the computer to look up information (Internet, CD-ROM) ---	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I send and read e-mails -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How you feel about reading

12

What do you think about reading? Tell how much you agree with each of these statements.

Fill **one** circle for each line.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) I read only if I have to	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I like talking about books with other people	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I would be happy if someone gave me a book as a present	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I think reading is boring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I need to read well for my future ---	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) I enjoy reading	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



13

How well do you read? Tell how much you agree with each of these statements.

*Fill **one** circle for each line.*

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) Reading is very easy for me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I do not read as well as other students in my class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) When I am reading by myself, I understand almost everything I read	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Reading aloud is very hard for me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14

What do you think about your school? Tell how much you agree with these statements.

Fill **one** circle for each line.

	Agree a lot	Agree a little	Disagree a little	Disagree a lot
a) I feel safe when I am at school -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) I like being in school -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) I think that students in my school work hard -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) I think that teachers in my school care about me -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) I think that teachers in my school want students to work hard -----	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Did any of these things happen at school during the last month (as far as you know)?

Fill **one** circle for each line.

	Yes	No
At school ...		
a) something was stolen from me -----	<input type="radio"/>	<input type="radio"/>
b) something was stolen from someone in my class -----	<input type="radio"/>	<input type="radio"/>
c) I was bullied by another student ---	<input type="radio"/>	<input type="radio"/>
d) someone in my class was bullied by another student -----	<input type="radio"/>	<input type="radio"/>
e) I was hit or hurt by another student -----	<input type="radio"/>	<input type="radio"/>
f) someone in my class was hit or hurt by another student -----	<input type="radio"/>	<input type="radio"/>

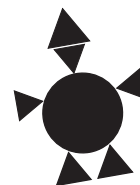
16

Which languages did you learn to speak when you were little?

If you learned more than one language at the same time when you were little you can check "Yes" for more than one language.

	Yes	No
a) <language of test>	<input type="radio"/>	<input type="radio"/>
b) <country-specific>	<input type="radio"/>	<input type="radio"/>
c) <country-specific>	<input type="radio"/>	<input type="radio"/>
d) <country-specific>	<input type="radio"/>	<input type="radio"/>
e) <country-specific>	<input type="radio"/>	<input type="radio"/>
f) Other	<input type="radio"/>	<input type="radio"/>

Please write in the name of the language.



17

How often do you speak <language of test> at home?

*Fill **one** circle only.*

Always or Almost Always -- ☐

Sometimes -- ☐

Never -- ☐

18

How often do you speak <language of test> with adults living in your home?

*Fill **one** circle only.*

Always or Almost Always -- ☐

Sometimes -- ☐

Never -- ☐

About how many books are there in your home?

(Do not count magazines, newspapers, or your school books.)

*Fill **one** circle only.*

None or very few (0-10 books) -- ☐

This shows 10 books



Enough to fill one shelf (11-25 books) -- ☐

This shows 25 books



Enough to fill one bookcase
(26-100 books) -- ☐

This shows 100 books



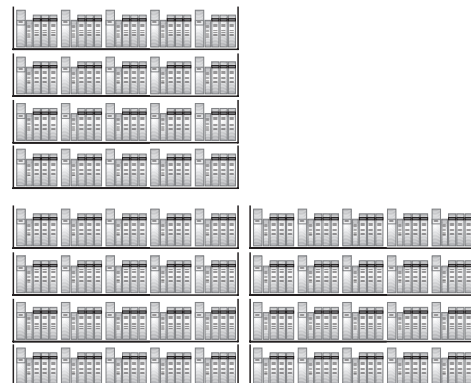
Enough to fill two bookcases
(101-200 books) -- ☐

This shows 200 books



Enough to fill three or more bookcases
(more than 200) -- ☐

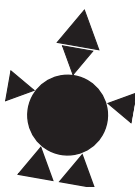
This shows more than 200 books



Do you have any of these things at your home?

Fill **one** circle for each line.

- | | Yes | No |
|--|-----------------------|-----------------------|
| a) Computer (do not include Nintendo®, Gameboy®, or other TV/video game computers) ----- | <input type="radio"/> | <input type="radio"/> |
| b) Study desk/table for your use ----- | <input type="radio"/> | <input type="radio"/> |
| c) Books of your very own (do not count your school books) ----- | <input type="radio"/> | <input type="radio"/> |
| d) Daily newspaper ----- | <input type="radio"/> | <input type="radio"/> |
| e) <country-specific indicator of wealth> ----- | <input type="radio"/> | <input type="radio"/> |
| f) <country-specific indicator of wealth> ----- | <input type="radio"/> | <input type="radio"/> |
| g) <country-specific indicator of wealth> ----- | <input type="radio"/> | <input type="radio"/> |
| h) <country-specific indicator of wealth> ----- | <input type="radio"/> | <input type="radio"/> |
| i) <country-specific indicator of wealth> ----- | <input type="radio"/> | <input type="radio"/> |
| j) <country-specific indicator of wealth> ----- | <input type="radio"/> | <input type="radio"/> |
| k) <country-specific indicator of wealth> ----- | <input type="radio"/> | <input type="radio"/> |
| l) <country-specific indicator of wealth> ----- | <input type="radio"/> | <input type="radio"/> |



21

Altogether, how many people live in your home?

(Do not forget to include yourself.)

*Fill **one** circle only.*

2 -- ☐

3 -- ☐

4 -- ☐

5 -- ☐

6 -- ☐

7 -- ☐

8 -- ☐

9 -- ☐

10 -- ☐

More than 10 -- ☐

22

How many children live in your home?

(Do not forget to include yourself.)

*Fill **one** circle only.*

1 -- ☐

2 -- ☐

3 -- ☐

4 -- ☐

5 -- ☐

6 -- ☐

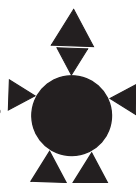
7 -- ☐

8 -- ☐

9 -- ☐

10 -- ☐

More than 10 -- ☐



23

Were you born in <country> ?

Fill **one** circle only.

Yes -- ☐

(If Yes, go to #24)

No -- ☐

If No...

23a. How old were you when you came to <country>?

Fill **one** circle only.

10 years old or older -- ☐

9 years old -- ☐

8 years old -- ☐

7 years old -- ☐

6 years old -- ☐

5 years old -- ☐

4 years old -- ☐

3 years old -- ☐

2 years old -- ☐

1 year old or younger -- ☐

24 _____

Was your mother born in <country>?

*Fill **one** circle only.*

Yes -- ☐

No -- ☐

I do not know -- ☐

25 _____

Was your father born in <country>?

*Fill **one** circle only.*

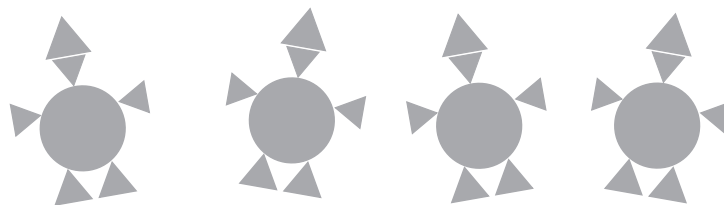
Yes -- ☐

No -- ☐

I do not know -- ☐

Thank You!

Thank you for filling out the questionnaire!



Student *Questionnaire*

PIRLS

PIRLS Ref. No. 01-0008



International Association for the Evaluation of
Educational Achievement (IEA)

PIRLS International Study Center
Boston College